									Application or Docke: Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003														
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)									ENTITY	OF	OTHE	R THAN		
TOTAL CLAIMS			27				I	RATE	FEE	7	RATE	FEE		
FOR			NUMBER FILEO		NUMBER EXTRA			BASIC F	EE 385.0	0 03	BASIC FEI	770.00		
TOTAL CHARGEABLE CLAIMS			.27 m	.27 minus 20=		• 7		XS 9=		OR	V6.0	1260		
NDE	PENDENT (CLAIMS .	minus 3 =				ŀ	X43=	+	-	Yec	-		
MULTIPLE DEPENDENT CLAIM PRESENT							- 1		-	HOR	_			
If the difference in column 1 is less than zero, enter "0" in column 2							L	-145=	+	OR	ــــــــــــــــــــــــــــــــــــــ			
CLAIMS AS AMENDED - PART II								TOTAL	· L	_lor		8960		
3 20 F (Column 1) (Column 2) (Column 3)							SMAL	. ENTITY	OR	SMALL	ENTITY			
TO IN	•	CLAIMS REMAINING AFTER AMENDMENT		MIGHE NAME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE]	RATE	ADDI- TIONAL FEE		
To	stal .	.37	Minus	-3	1	e	Г	XS 9≠		OR	X\$18=			
10	dependent	1 2	Minus	- 3	3	. 0		X43=		OB	X86=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=			
f- 10							L	TOTAL	+	4	TOTAL	-		
•		(Column 1)		(Colum	n 21	(Cotumn 3)	AC	DIT. FEE	<u> </u>		ADDIT. FEE			
111	1. 1	CLAMS REMAINING		- HIGHE	ST	PRESENT	Г	-	ADDI-	7 [ADDi-		
Ľ	16/05	AFTER AMENDMENT		PREVIO	JSLY	EXTRA		RATE	TIONAL		RATE	TIONAL		
To	tal	- 25	Minus	-2		•0	Г	XS 9=	·.	OR	X\$18=			
—	pependent	- 2	Minus	- 2	<u> </u>			X43=		OR	X86•			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							T.	145=		OR	+290=	·		
16	13					•		TOTAL	.:		YOTAL	-		
/	104	(Column 1)		· (Calumi	21	(Column 3)	/ADI	DIT. FEE	·	,	COIT. FEEL			
1		CLAIMS REMAINING	•	MIGHE:	51	PRESENT			ADDI-			ADDI-		
Tot		AFTER AMENDMENT		PREVIOU PAID FO	SLY	EXTRA	F	MTE	TIONAL FEE		RATE	TIONAL		
Tot	al	· 25	Minuis	- d	5	•	X	\$ 9-	FEE		X\$18=	FEE.		
1	ependent	· 2-	Minus	O	V		-	(43=		OR				
FIF	ET PRESE	NTATION OF MU		i45=		OR	X86=							
ti the	If the entry in column 1 is less than the entry to column 2, write "O" in column 3.									OA	+290=			
o the	Pugness Nur "Highest Nur	nber Previously Pai mber Previously Pai	d For IN THIS	SPACE III II S SPACE II: II	es than	20, enter 20.		TOTAL T. FEE			TOTAL DOTT. FEE			
The '	Highesi Mum	ber Previously Paid	For (Total or	Indopendent	d the	uitues unuosi p	ownd i	n the app	propriate ber	s of code	700 1.			
u PTO	473 (Nev 10	an'				· ·		on Traces		4 0404	MINEMI OF			

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